



07/12/04

EPW/1651

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Express Mail No.: EV475140912US

IN THE UNITED STATES PATENT AND TRADEMARK OFFICE

Application of: Graner et al.

Confirmation No.: 8714

Serial No.: 10/091,390

Art Unit: 1651

Filed: March 5, 2002

Examiner: Weber, Jon P.

For: METHODS OF RECOVERING
CHAPERONE PROTEINS
AND COMPLEXES
THEREOF

Attorney Docket No: 8449-181-999

AMENDMENT UNDER 37 C.F.R. § 1.111

Commissioner for Patents
P.O. Box 1450
Alexandria, VA 22313-1450

Sir:

In response to the Office Action mailed January 9, 2004, and in accordance with 37 C.F.R. § 1.111, please enter the amendments and consider the remarks below. Applicants submit herewith: (a) a Petition for Extension of Time (in duplicate) for three (3) months from April 9, 2004 up to and including July 9, 2004, accompanied by the appropriate provision authorizing payment of the required fee; (b) an Amendment fee sheet; (c) a Declaration under 37 C.F.R. § 1.132 by Dr. Michael W. Graner and Dr. Emmanuel Katsanis; and (d) a second Declaration under 37 C.F.R. § 1.132 by Dr. Michael W. Graner with attached Exhibit A.

Amendments to the Specification begin on page 2 of this paper.

Amendments to the Claims are reflected in the listing of claims which begins on page 8 of this paper.

Remarks/Arguments begin on page 13 of this paper.

07/14/2004 ZJUWAR1 00000105 503013 10091390

01 FC:2202 135.00 DA
02 FC:2203 145.00 DA



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FEE TRANSMITTAL SHEET

Commissioner for Patents
P.O. Box 1450
Alexandria, VA 22313-1450

Sir:

The fee required to be filed with the accompanying amendment of even date herewith concerning the above-identified application has been estimated to be \$226.00.

The claim amendment fee has been estimated as shown below:

| (Col. 1) | | | (Col. 2) | | (Col. 3) | | <input checked="" type="checkbox"/> SMALL ENTITY | <input type="checkbox"/> OTHER THAN A SMALL ENTITY | | |
|---|----|-------|-----------------------------------|--|------------------|--|--|--|----|------------|
| CLAIMS REMAINING AFTER AMENDMENT | | | HIGHEST NO. PREVIOUSLY PAID | | PRESENT EXTRA | | RATE | ADDIT. FEE | OR | ADDIT. FEE |
| TOTAL | 35 | MINUS | 20 | | 15 | | x 9 | \$ 135.00 | | x 18 \$ |
| INDEP. | 3 | MINUS | 3 | | 0 | | x 43 | \$ 0.00 | | x 86 \$ |
| <input checked="" type="checkbox"/> FIRST PRESENTATION OF MULTIPLE DEP. CLAIM | | | | | | | 145 | \$ 145.00 | | \$ |
| | | | | | | | TOTAL | \$ 280.00 | OR | TOTAL \$ |

Please charge the required fee to Jones Day Deposit Account No. 50-3013. A copy of this sheet is enclosed.

Respectfully submitted,

Date: July 9, 2004

Adriane M. Antler 32,605
Adriane M. Antler (Reg. No.)

JONES DAY
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New York, NY 10017
(212) 326-3939